## t09000083138

(Requestor's Name)
(Address)
(Address)
( tamess,
(City/State/Zip/Phone #)
PICK-UP WAIT MAIL
(Business Entity Name)
(Lusiness Littly Name)
(Document Number)
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OCT 20 2009

EXAMINER

## **COVER LETTER**

Division of Cor	rporations				
SUBJECT:	Land Trustee, LLC  Name of Limited Liability Company				
The enclosed Articles of	Amendment and fee(s) are su	bmitted for filing.			
Please return all correspo	ondence concerning this matter	to the following:			
		Nancy J. Flint			
		Name of Person			
	Land Trustee, LLC				
	Firm/Company				
		710 Vassar Street			
Address					
	Orlando, FL 32804  City/State and Zip Code				
	nana	•		35 8	- 17
	E-mail address: (	y@bridgewellcapital.com to be used for future annual report no	otification)	\$ 5 5	gynaponyan kasana pp n n n
For further information co	oncerning this matter, please of	eall:		1,12 - 0	1. 1
					غو <sub>مار دا</sub> و
	ancy J. Flint	at \	147-5000, x103	<u> ಕೌಕ</u> ಈ	
Name of	f Person	Area Code & Dayt	time Telephone Number	7	
Enclosed is a check for the	ne following amount:				
\$25.00 Filing Fee	\$30.00 Filing Fee & Certificate of Status	\$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	sed) Certified	te of Status &	ed)

**MAILING ADDRESS:** 

Registration Section

TO:

Registration Section
Division of Corporations
P.O. Box 6327
Tallahassee, FL 32314

STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

## ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

Land ]	Frustee, LLC		
(Name of the Limited Liability Co (A Florida Lim	ompany as it now appears lited Liability Company)	s on our records.)	
The Articles of Organization for this Limited Liability Com	npany were filed on	8/27/09	and assigned
lorida document number <u>L0900083138</u>			
his amendment is submitted to amend the following:			
If amending name, enter the new name of the limited	i liability company here	:	
he new name must be distinguishable and end with the words 'L.C."	"Limited Liability Compan	y," the designation "LL	C" or the abbreviation
nter new principal offices address, if applicable:	<del></del>	<u> </u>	
rincipal office address MUST BE A STREET ADDRES	<u> </u>		
	<del></del>		
			3 1
iter new mailing address, if applicable:		الراجي المساحدة المسا	manage Al a Millionen. House of Division and
failing address MAY BE A POST OFFICE BOX)		Mi-K	
- ·		المعادة المعادلة الم المعادلة المعادلة ا المعادلة المعادلة ا	5
		t his sum and the sum of the sum	. U
If amending the registered agent and/or registere		r records, enter the	
gistered agent and/or the new registered office address	s here:		
Name of New Registered Agent:	<u> </u>	·	
New Registered Office Address:			
	Ente	r Florida street addre	88
		, Florida	
	City	<del>-</del>	Zip Code

New Registered Agent's Signature, if changing Registered Agent:

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 608, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

If Changing Registered Agent, Signature of New Registered Agent

If amending the Managers or Managing Members on our records, enter the title, name, and address of each Manager or Managing Member being added or removed from our records:

MGR = Manager MGRM = Managing Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	John E. Parrett	710 Vassar Street Orlando, FL 32804	✓ Add Remove
<u> </u>			
<del></del>			AddRemove
<del></del>			= n
			Damaya
			Add Remove
D. If amen	ding any other information, ente	er change(s) here: (Attach additional sh	neets, if necessary.)
_ _			1 1 20 6 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5 5
 Dated	October 9	2009	MID: 51
	Signature of a	member or authorized representative of a r	nember
		John E. Parrett Typed or printed name of signee	<u></u>

Page 2 of 2

Filing Fee: \$25.00